## DEPARTMENT OF HEALTH AND HUMAN SERVICES CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 09/26/2019 FORM APPROVED OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING			(X3) DATE SURVEY COMPLETED		
		34G150	B. WING		i i		09/24/2019	
NAME OF PROVIDER OR SUPPLIER  IRENE WORTHAM RESIDENTIAL CENTER-AZALEA			STREET ADDRESS, CITY, STATE, ZIP CODE  16 AZALEA STREET  ASHEVILLE, NC 28803					
(X4) ID PREFIX TAG	(EACH DEFICIENC)	ATEMENT OF DEFICIENCIES Y MUST BE PRECEDED BY FULL SC IDENTIFYING INFORMATION)	ID PREFI TAG	x	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD B CROSS-REFERENCED TO THE APPROPRIA DEFICIENCY)	E NTE	(X5) COMPLETION DATE	
	INDIVIDUAL PROGRACER(s): 483.440(c)(6) The individual program opportunities for client self-management. This STANDARD is not Based on observation interview, the facility faresiding in the home (#provided opportunities management relative to finding is:	W	2247	Staff will be inserviced and retrained on resident participation in mealtime preparation. This will cover how staff are to include residents in cooking meals, serving food, and setting the table to the best of the residents abilities.  RECEIVED  OCT 17 2019  DHSR NH L & C Black Mountain / WRO		nd		
	Observations in the group home on 9/23/19 at 4:15 PM through 5:00 PM revealed staff preparing tuna noodles, carrots, rolls/bread, and a hot pocket for client #1 in the kitchen for the dinner meal. Examples of meal preparation activities completed by staff included: obtaining cooking pans, ingredients to prepare tuna noodles, carrots and stirring and mixing foods. Continued observations revealed staff to prepare each client's meal in the kitchen, to place items in clients' individual plates, cut food items into pieces based on prescribed diets, and carry all food and drink items to the table. No client was observed to assist with food preparation or to carry food and drink items to the table.							
t t c n iii c	he kitchen for the break observation revealed stance neal in the kitchen, to pendividual plates based of carry all food and drink it dient was observed to a preparation or to carry for	M revealed staff gs, muffins, and grits in kfast meal. Continued aff to prepare each client's clace items in clients' on prescribed diets, and items to the table. No						

Any deficiency statement ending with an asterisk (\*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

FORM CMS-2567(02-99) Previous Versions Obsolete

Event ID: LL1J11

Facility ID: 922044

If continuation sheet Page 1 of 3

(X6) DATE

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W 247	Review of the recor individual program in Review of the curre able to; feed independent of the record dated 2/14/19. Review of the record dated 2/14/19. Review of the sink with movement activities and peers.  Review of the record dated 10/11/18. Review of the record dated 2/14/19. Review of the record dated 10/11/18. Review of the recor	d for client #1 revealed an plan (IPP) dated 5/16/19. Int IPP revealed the client is endently, carries plate and cup al cues.  Ind for client #2 revealed an IPP view of the current IPP is able to follow simple independently, needs hand ce to serve, carries plate and inverbal cues, enjoys variety of is and a helping hand to staff in a helping hand to staff in the current IPP is able to; feed independently, up to kitchen with verbal cues.  Indicate the current IPP is able to; feed independently, up to kitchen with verbal cues.  Indicate the current IPP is able to; feed independently, up to kitchen with verbal cues.	W	247				

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W 247	the QIDP further verifi home should be given	ed all clients residing in the the opportunity to pect of meal preparation	W	247	DEFICIENCY)				